

RECEIVED CENTRAL FAX CENTER

OCT 17 2005

€ 8 55

FENWICK & WEST LLP

Silicon Valley Center • 801 California Street • Mountain View, CA 94041 Tel 650.988.8500 • Fax 650.938.5200 • www.fenwick.com

FACSIMILE TRANSMISSION

CONFIDENTIAL

DATE: October (7, 2005)

CLIENT-MATTER No.: 24207-10065

ω.	
U .	

		
NAME	Fax No.	PHONE No.
USPTO	571-273-8300	

FROM:

Sabra-Anne R. Truesdale

PHONE:

(650) 335-7187

SENT BY:

Dana Chevalier

PHONE:

(650) 943-5363

NUMBER OF PAGES WITH COVER PAGE: 3	ORIGINAL WILL NOT FOLLOW		
Message:			
Please see attached.			

CAUTION - CONFIDENTIAL

THE INFORMATION CONTAINED IN THIS FACSIMILE MESSAGE IS PRIVILEGED AND CONFIDENTIAL INFORMATION INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE OR THEIR DESIGNEE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION OR COPY OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU HAVE RECEIVED THIS COMMUNICATION IN ERROR PLEASE IMMEDIATELY NOTIFY US BY TELEPHONE AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE ADDRESS VIA THE U.S. POSTAL SERVICE. THANK YOU.

IF YOU DO NOT RECEIVE ALL OF THE PAGES, OR IF THEY ARE NOT CLEAR, PLEASE CALL DANA CHEVALIER AT (650) 943-5363 AS SOON AS POSSIBLE.

A1000/00103/DOCS/1403268.1

650 938 5200

TRANSMITTAL FORM (to be used for all correspondence during pendency of filed application)		Application Number	10/765,014	
		Filing Date	January 26, 2004	
		First Named Inventor	Craig Nevill-Manning	
		Group Art Unit Number	2171	
		Examiner Name	Not Yet Known	
Total Number of Pages in This Submission	2	Attorney Docket Number	24207-10065 (formerly 53051/295860)	
ENCL	OSURES	(check all that apply		
Fee Transmittal Form (in duplicate) Check Enclosed Return Receipt Postcard Response to Notice to File Missing Parts Assignment & Recordation Cover Sheet Declaration Power of Attorney Application Data Sheet Information Disclosure Statement & PTO/SB/08A Copies of IDS Cited References Request for Corrected Filing Receipt Request for Correction of Recorded Assignment Amendment/Response: [] Page(s) After Final Status Request Revocation and Substitute Power of Attorney		Issue Fee Transf Letter to Chief Dr Format Drawing(s [] Sheet(s Appeal Communi Interferences Appeal Communi (Appeal Notice, I Certified Copy of After Allowance C	nittal aftsperson s):) of Figure(s) [] cation to Board of Appeals and	
REMARKS:				
SIGNAT	URE OF A	TTORNEY OR AGEN	Τ	
Signature:	72=	lle _		
Attomey/Reg. No.: Sabra-Anne R. Truesc	iale, Reg. No	s. 55,687	Dated: 10-17-05	
CERTIFICATE OF FACSIMILE TRANSMISSION				
I hereby certify that this correspondence, including the enclosures identified above, is being transmitted on the date shown below via facsimile to: Commissioner for Patents at the facsimile number indicated below.				
Signature:	372	a le		
Typed or Printed Name: Sabra-Anne R. T	ruesdale		Dated: 10-17-05	
Facsimile Number: 5	71-273-8300			

*Total of one form is submitted.

CORRESPONDENCE		Address to:		RECEIVED CENTRAL FAX CENTE		
ADDRESS INDICATION FORM		Commissioner f P.O. Box 1450 Alexandria, VA		OCT 17	2005	
Please red	cognize the follow	ring address as the co	orrespondence address:			1
	omer Number	00758				
OR						
i		Type Customer Number he				
			/SB/125) submitted	herewith.		_
in the foll	owing listed ap	olication(s) or patent	t(s):			
Patent Numi (if appropria	nte) Ap	plication Number	Patent Date (if appropriate)		S. Filing Date]
	10/54			09-30-2004	•	1
	10/749 10/749			12-31-2003 12-31-2003		
	10/74			12-31-2003		
	10/75			12-31-2003		
-	10/76			12-31-2003 01-26-2004		
	10/813	3,818		03-31-2004		i
	10/814			03-31-2004	1	
]	10/814 10/814		ļ	03-31-2004		
	10/814			03-31-2004 03-31-2004		
	10/814			03-31-2004		
ł	10/814			03-31-2004	•	
	10/814			03-31-2004		
	10/815			03-31-2004		ľ
•	10/872			05-26-2004		<u> </u>
<u> </u>	10/881			06-30-2004		1
	10/882			06-30-2004		
	10/882			06-30-2004		1
	10/948			09-23-2004		
i	11/026			12-20-2004 12-31-2004		
	11/026			12-31-2004		
Typed Name	Sabra-Anne R.	Truesdale		(check one)		
Signature	See	Tal	la	Applicant or Par	tentee	
Date 19-17-05		Assignee of reco				
Address of signer. Fenwick & West LLP		37 CFR 3.73(b) (Form PTO/SB/	is enclosed.	1		
Silicon Valley Center		(com F10/38/	7 0)	l		
801 California Street			Attomey or Age	nt of record		
Mountain View, CA 94041 Tel.: (650) 335-7187						
Fax.: (650) 938-5200			<u>55,687</u>		l	
NOTE: Signature of all the inventors or assignees of record of the entire in				(Reg.	No.)	
if more than one signatu	In is required, see bo	elow".	s interest or their representativ	re(s) are required. Sui	omit multiple forms	